

ACKNOWLEDGMENT OF DESIGNATED PRINCIPAL
(Read the following, sign this page, and have it notarized.)

I, _____, the designated principal pursuant to Judicial Administration Code § 7-208 (F)(6), agree to ensure that:

- a) I will prepare and submit, WITH THE APPLICATION, a list of all Certified Legal Document Preparers and all trainees acting for, or on behalf of, the business entity.
- b) I will file with Certification and Licensing Division staff a list of all Certified Legal Document Preparers and all Trainees acting for, or on behalf of, the business entity **by June 30th of each year**.
- c) I will notify the Certification and Licensing Division, in writing, of any changes in employee or trainee status **within 30 days** of any change.
- d) I will actively and directly supervise all other Certified Legal Document Preparers, Trainees, and staff working for, or on behalf of the business entity.
- e) I will represent the business entity, at the discretion of the entity, in any proceeding under this code section.
- f) I will notify the Legal Document Preparer Program **within 30 days** if I am no longer in a position to continue serving as the designated principal for the business entity.
- g) I will make all Certified Legal Document Preparers, Trainees, and staff of the business aware that they are bound by the Code of Conduct for Certified Legal Document Preparers as promulgated by the Arizona State Supreme Court.
- h) I will file, in writing with Certification and Licensing Division, a notice of any changes in members, partners, managers, officers, directors, and owners of the business entity **within 30 days** of any change.
- i) I have read and reviewed Arizona Supreme Court Rule 31 and Arizona Code of Judicial Administration §§ 7-201 and 7-208 and understand and agree to abide by and uphold both the Rule and the ACJA.

Signature of Designated Principal

THE STATE OF ARIZONA, COUNTY OF _____

Before me, the above signed authority, on this day personally appeared _____,
known to me to be the person whose name is subscribed to the foregoing instrument, and acknowledged to
me that he/she executed the same for the purposes expressed, and affirmed that the facts detailed are true.

Given under my hand and seal of office on this _____ day of _____, 20_____.

Notary Public, State of Arizona

Notary's Name Printed

My Commission Expires

AUTHORIZATION AND RELEASE

Having filed this application, I hereby consent to having an investigation made of the business' character, professional reputation, and fitness for Legal Document Preparer certification. I agree to give any further information which may be required in reference to the past record of the business.

I also authorize and request every person, firm, company, corporation, governmental agency, court, association, or institution having control of any documents, records, and other information including documents, records, charges or complaints filed against the business, formal or informal, pending or closed, or any other pertinent data, and to permit the Arizona Supreme Court, or any of its agents or representatives to inspect and make copies of such documents, records, and other information.

I release, discharge, and exonerate the Arizona Supreme Court, its agents and representatives, the State of Arizona, and any person furnishing information pursuant to this Authorization and Release from all liability which may arise from the investigation made by the Arizona Supreme Court Legal Document Preparer Program.

I understand willful omission or misrepresentation of any fact required to be disclosed in this application, or any accompanying statement, is grounds for refusing to issue or renew a certificate or for revoking or suspending a certificate.

Being duly sworn, I _____ on behalf of _____,
depone and say that I have read the foregoing, and each statement and answer made, together with the Authorization and Release and under penalty of perjury, swear that all such answers, statements and data attached to this application are true and correct. Willful misrepresentation of any fact required to be disclosed in any application, or accompanying statement, is grounds for refusing to issue or renew a license, or for revoking or suspending a license.

Full Signature of Designated Principal

AFFIDAVIT OF VERIFICATION

THE STATE OF ARIZONA, COUNTY OF _____

Before me, the above signed authority, on this day personally appeared _____,
known to me to be the person whose name is subscribed to the foregoing instrument, and acknowledged to me that he/she executed the same for the purposes expressed, and affirmed that the facts detailed are true.

Given under my hand and seal of office on this _____ day of _____, 20____.

Notary Public, State of Arizona

Notary's Name Printed

My Commission Expires